Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 1 of 45

Fill in this information to identify your c		
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS		
Case number (if known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture	James	
	identification (for example, your driver's license or	First Name S	First Name
	passport).	Middle Name	Middle Name
	Bring your picture identification to your meeting	Hodrick Last Name	Last Name
	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you		
	have used in the last 8 years	First Name	First Name
	Include your married or	Middle Name	Middle Name
	maiden names.	Last Name	Last Name
3.	Only the last 4 digits of your Social Security	xxx - xx - <u>2</u> <u>9</u> <u>2</u> <u>5</u>	xxx - xx
	number or federal Individual Taxpayer	OR	OR
	Identification number (ITIN)	9xx - xx	9xx - xx

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 2 of 45

Del	btor 1	James First Name	S Middle Nam	Hodrick e Last Name		Case nu	mber (if known)	
			Abou	ıt Debtor 1:		Abo	out Debtor 2 (S	Spouse Only in a	Joint Case):
4.	and E	usiness names mployer		I have not used any bu	usiness names or EIN			ed any business	
	(EIN)	fication Numbers you have used in st 8 years	Busine	ess name		Bus	iness name		
	Includ	e trade names and	Busine	ess name		Bus	iness name		
	aoing	business as names	Busine	ess name		Bus	iness name		
			EIN			EIN	. — - —		
			EIN			EIN	- - -		_ — —
5.	Where	e you live				If D	ebtor 2 lives a	nt a different add	ress:
				' S. Harlem					
			Numb			Nun	nber Street		
			<u>Apt</u>	1E					
			Berv	vyn IL	60304				
			City	State		City	,	State ZIP	Code
			Coo Count			- Cou	ıntv		
				•			•		
			the o	ur mailing address is ne above, fill it in her will send any notices in ng address.	re. Note that the	froi will	m yours, fill it	ing address is din here. Note thates to you at this r	at the court
			Numb	er Street		Nun	nber Street		
			P.O. E	Вох		P.O	. Box		
			City	State	e ZIP Code	City	,	State ZIP	Code
6.		ou are choosing	Chec	k one:		Che	eck one:		
	tnis d bankr	istrict to file for uptcy		Over the last 180 days petition, I have lived in than in any other distri	this district longer			180 days before re lived in this dis ther district.	-
				I have another reason (See 28 U.S.C. § 1408			I have anothe (See 28 U.S.	er reason. Explai C. § 1408.)	n.
Р	art 2:	Tell the Court	: About Yo	our Bankruptcy C	ase				
7.	Bankr	hapter of the ruptcy Code you noosing to file		one: (For a brief desc kruptcy (Form 2010)).					· Individuals Filing
	under	_	□ c	hapter 7					
			□ c	hapter 11					
			□с	hapter 12					
			∑ C	hapter 13					

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 3 of 45

Deb	otor 1 James	S	Hodrick	Case number (if know	n)				
	First Name	Middle Name	Last Name		,				
8.	How you will pay the fee	cour pay	t for more details about how you with cash, cashier's check, or m		paying the fee yourself, you may ubmitting your payment on your				
			I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A).						
		By la than fee i	aw, a judge may, but is not requ 150% of the official poverty line	e that applies to your family size his option, you must fill out the A	do so only if your income is less				
9.	Have you filed for	☑ No							
	bankruptcy within the last 8 years?	☐ Yes.							
	•	District _		When	Case number				
		District _		When	Case number				
		District _		MM / DD / YYY When MM / DD / YYY	Case number				
10	Are any bankruptcy	I ✓ No		MIMI / UU / YYY	Y				
10.	cases pending or being								
	filed by a spouse who is not filing this case with	Yes.							
	you, or by a business	Debtor _		Relation	nship to you				
	partner, or by an affiliate?	District _			Case number,				
		Debtor		Relatio	nship to you				
		– District		-	Case number,				
				MM / DD / YYY	Y if known				
11.	Do you rent your	□ No.	Go to line 12.						
	residence?	☑ Yes.	Has your landlord obtained a residence?	n eviction judgment against you	and do you want to stay in your				
			_	ment About an Eviction Judgme	` ,				

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 4 of 45

Deb	tor 1	James First Name	S Middle N	lama	Hodrick Last Name	Case number (if	known)		
P	art 3:	1	Middle N Anv Rı		sses You Own as a	s Sole Proprietor			
	Are you of any fi busines	a a sole proprietor full- or part-time ss? proprietorship is a s you operate as an		No.	Go to Part 4. Name and location of b Name of business, if any	·			
	individual, and is not a separate legal entity such as a corporation, partnership, or LLC.				Number Street				
	sole pro	ave more than one oprietorship, use a e sheet and attach it etition.			Health Care Busin Single Asset Rea Stockbroker (as d	box to describe your business: ness (as defined in 11 U.S.C. § 1 I Estate (as defined in 11 U.S.C. efined in 11 U.S.C. § 101(53A)) er (as defined in 11 U.S.C. § 101	. § 101(51B))	ZIP Co	de
13.	3. Are you filing under Chapter 11 of the Bankruptcy Code and are your a small busines		can mos	set ap st rece	opropriate deadlines. If you	the court must know whether you indicate that you are a small lent of operations, cash-flow state texist, follow the procedure in 1	business de tement, and f	btor, you federal in	must attach your come tax return
	debtor?	efinition of small	☑	No.	•	napter 11. er 11, but I am NOT a small bus	siness debtor	accordin	g to the definition in
		s debtor, see C. § 101(51D).		Yes.	the Bankruptcy Code. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.				
Pa	art 4:	Report If You (Own o	r Hav	e Any Hazardous F	Property or Any Property	That Need	ds Imm	ediate Attention
14.	propert alleged immine	own or have any y that poses or is to pose a threat of nt and identifiable to public health or		No Yes.	What is the hazard?				
safety? any pro		Or do you own perty that needs attention?			If immediate attention	is needed, why is it needed?			
	perisha livestoc	mple, do you own ble goods, or k that must be fed, or ng that needs urgent			Where is the property?	Number Street			
						City		State	ZIP Code

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 5 of 45

Debtor 1 James S Hodrick Case number (if known)
First Name Middle Name Last Name

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again. About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a brie	fing about
credit counseling because of:	

I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case): *You must check one:*

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

П	I am	not	required	l to	receive	а	briefing	about
			unseling					

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 6 of 45

Deb	otor 1	James	S	Hodrick		Case number (if	know	n)	
		First Name	Middle N	lame Last Name				, 	
P	art 6:	Answer These	Quest	ions for Reporting P	urpos	ses			
16.	What ki	ind of debts do you	16a	•	dual pi	sumer debts? Consumer derimarily for a personal, family,		re defined in 11 U.S.C. § 101(8) usehold purpose."	
			16b	•	invest	iness debts? Business deb iment or through the operation		e debts that you incurred to obtain e business or investment.	
			16c	State the type of debts y	ou ow	e that are not consumer or bu	sines	s debts.	
17. Are you filing under Chapter 7?			☑	No. I am not filing unde	r Chap	oter 7. Go to line 18.			
	-	estimate that after empt property is		Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is exclusion administrative expenses are paid that funds will be available to distribute to unsecutive.					
		strative expenses		□ No					
	availab	d that funds will be le for distribution ecured creditors?		☐ Yes					
18.		any creditors do		1-49		1,000-5,000		25,001-50,000	
	you est	timate that you		50-99		5,001-10,000		50,001-100,000	
				100-199 200-999	П	10,001-25,000		More than 100,000	
19.		uch do you	$\overline{\mathbf{Q}}$	\$0-\$50,000		\$1,000,001-\$10 million		\$500,000,001-\$1 billion	
	be wor	te your assets to th?		\$50,001-\$100,000 \$100,001-\$500,000	무	\$10,000,001-\$50 million \$50,000,001-\$100 million	R	\$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion	
				\$500,001-\$1 million		\$100,000,001-\$500 million		More than \$50 billion	
20.		uch do you		\$0-\$50,000		\$1,000,001-\$10 million		\$500,000,001-\$1 billion	
	be?	te your liabilities to		\$50,001-\$100,000 \$100,001-\$500,000		\$10,000,001-\$50 million \$50,000,001-\$100 million	R	\$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion	
			님	\$500,001-\$1 million	H	\$100,000,001-\$500 million	H	More than \$50 billion	

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 7 of 45

Debtor 1	James	S	Hodrick	Case number (if known)				
	First Name	Middle Name	Last Name					
Part 7:	Sign Below							
or you		I have exami and correct.	ned this petition, and I d	eclare under penalty of perjury that the information provided is true				
		or 13 of title	•	r 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, I understand the relief available under each chapter, and I choose to				
		•	If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.						
		connection w		nt, concealing property, or obtaining money or property by fraud in an result in fines up to \$250,000, or imprisonment for up to 20 years, 19, and 3571.				
		-	es S Hodrick Hodrick, Debtor 1	X Signature of Debtor 2				
		Executed	on <u>08/16/2016</u> MM / DD / YYYY	Executed on MM / DD / YYYY				

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 8 of 45

First Name	Middle Name	Last Name		
For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page.	eligibility to relief availa y the debtor(s	proceed under Chapter 7, 1 ble under each chapter for b) the notice required by 11 have no knowledge after a	which the person is eligible. I als U.S.C. § 342(b) and, in a case in	ates Code, and have explained the so certify that I have delivered to
	71 101 01111	idia F. Badillo e of Attorney for Debtor	Date	e 08/16/2016 MM / DD / YYYY
	Claudia Printed r	a F. Badillo name		
	Firm Na	Law Group me /. Higgins Rd.		
	Number Suite 1	Street 10		
	 Chicag	0	<u>IL</u>	60631
	City Contact	phone (773) 716-7736	State	ZIP Code lolawyer@gmail.com
	629499 Bar num	2	Email address <u>badin</u> <u> </u>	—

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 9 of 45

	ill in this inf	ormation to i	dentify your case	and this filing:		
	ebtor 1	James	S	Hodrick		
D	ebtor 2	First Name	Middle Name	Last Name		
	Spouse, if filing)	First Name	Middle Name	Last Name		
U	nited States Bar	nkruptcy Court fo	r the: NORTHERN D	ISTRICT OF ILLINOIS	_	
1 -	ase number f known)					c if this is an ded filing
	ficial Form					
So	chedule A/	B: Propert	у			12/15
the filir she	asset in the cang together, bo	ntegory where year th are equally re . On the top of a	ou think it fits best. B esponsible for supplyi any additional pages,	e as complete and accura ng correct information. It write your name and case	an asset fits in more than one ca ate as possible. If two married p f more space is needed, attach a e number (if known). Answer eve eal Estate You Own or Have	eople are separate ery question.
1.					ng, land, or similar property?	
•	✓ No. Go t		·	in any residence, bundin	g, land, or similar property:	
2.		-	•	of your entries from Part ite that number here		\$0.00
P	art 2: Des	scribe Your \	ehicles			
	•		•		ney are registered or not? Includ G: Executory Contracts and Unexp	•
3.	Cars, vans, tr	ucks, tractors,	sport utility vehicles, i	notorcycles		
	☑ No ☐ Yes					
4.					ner vehicles, and accessories biles, motorcycle accessories	
5.		•	•	of your entries from Part ite that number here	_	\$0.00
Р	art 3: Des	scribe Your F	Personal and Hous	sehold Items		
Do	you own or ha	ve any legal or e	equitable interest in a	ny of the following items?	,	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	_	oods and furnis ajor appliances, f	nings urniture, linens, china,	kitchenware		
	□ No ✓ Yes. Des	cribe Misc.	household goods in	cluding bedroom set a	and living room furniture	\$300.00

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 10 of 45

Deb	_	ames	S	Hodrick	Case number (if known)	
		st Name	Middle Name	Last Name		
7.	Electronic Examples:	Televisions an			ipment; computers, printers, scanners; cameras, media players, games	
	□ No ☑ Yes. I	Describe Mi	sc. home elect	ronics, television set, la	ptop and cell phone	\$200.00
8.		•		s, prints, or other artwork; bo	ooks, pictures, or other art objects; memorabilia, collectibles	
	✓ No ☐ Yes. I	Describe				
9.			raphic, exercise,	and other hobby equipment pols; musical instruments	bicycles, pool tables, golf clubs, skis;	
	✓ No ☐ Yes. I	Describe				
10.	•	Pistols, rifles,	shotguns, ammur	nition, and related equipmen	t	
	✓ No ☐ Yes. I	Describe				
11.	•	Everyday cloth	nes, furs, leather o	coats, designer wear, shoes	accessories	
	✓ No ☐ Yes. I	Describe				
12.	Jewelry Examples:	Everyday jewe gold, silver	elry, costume jewe	elry, engagement rings, wedd	ding rings, heirloom jewelry, watches, gems,	
	□ No ☑ Yes. I	Describe Or	ne watch and e	arring		\$200.00
13.	Non-farm Examples:	animals Dogs, cats, bir	ds, horses			
	✓ No ☐ Yes. I	Describe				
14.	Any other did not lis	-	household items	you did not already list, in	cluding any health aids you	
		Give specific ation				
15.			•		entries for pages you have	\$700.00
Pa	art 4:	Describe Yo	ur Financial <i>A</i>	Assets		
Doy	you own or	have any lega	l or equitable int	erest in any of the followir	g?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Examples:	Money you have	ve in your wallet,	in your home, in a safe depo	osit box, and on hand when you file your	
	□ No ☑ Yes				Cash:	\$500.00

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 11 of 45

Deb	tor 1 Ja	ames	S	Hodrick	Case number (if known)
	Fir	rst Name	Middle Name	Last Name	· · · · ·
17.	Deposits <i>Examples</i> .	: Checking, saving	es, and other similar in	accounts; certificates of deposit; so nstitutions. If you have multiple a	
	✓ No ☐ Yes		Institution r	name:	
18.			ublicly traded stocks estment accounts with	s brokerage firms, money market	accounts
	✓ No ☐ Yes		Institution or issuer n	ame:	
19.	-	•	and interests in inco nership, and joint ve	orporated and unincorporated butter	usinesses, including
	inform	Give specific nation about	Name of author		Of all and a series
	them		Name of entity:		% of ownership:
20.	Negotiable	e <i>instrument</i> s inclu	ide personal checks,	egotiable and non-negotiable in cashiers' checks, promissory note transfer to someone by signing o	es, and money orders.
	inform	Give specific nation about	Issuer name:		
21.		nt or pension acc : Interests in IRA, profit-sharing pla	ERISA, Keogh, 401(k	x), 403(b), thrift savings accounts	, or other pension or
		List each nt separately. T	ype of account:	Institution name:	
22.	Your share Examples.		oosits you have made	e so that you may continue servicent, public utilities (electric, gas, w	
	☑ No		L	attentino e a como e a tradició de al	
22	_			stitution name or individual: ment of money to you, either for li	fo or for a number of years)
23.	☑ No	•	Issuer name and des		te of for a number of years)
24.			RA, in an account in A(b), and 529(b)(1).	a qualified ABLE program, or u	under a qualified state tuition program.
	✓ No ☐ Yes		Institution name and	description. Separately file the re	ecords of any interests. 11 U.S.C. § 521(c)
25.		•		(other than anything listed in	line 1), and rights or
	✓ No Yes.	xercisable for you Give specific nation about them	ur benem		
26.	Examples. No	: Internet domain		, and other intellectual property ceeds from royalties and licensing	
		Give specific nation about them			

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 12 of 45

Deb	tor 1	James	S	Hodrick	Case number (if known)		
		First Name	Middle Name	Last Name			
27.			and other general inta	•	on holdings, liquor licenses, professiona	al licens	es
	₩ No		inio, excidente necinee	o, 000po.a 0 account	ge,queee, p.e.ee		
	بخا	s. Give specific					
		ormation about th	em			•	
Moi	av or n	roperty owed to	vou?				Current value of the
	icy or p	operty owed to	you.				portion you own?
							Do not deduct secured
						(claims or exemptions.
28.	Tax ref	unds owed to y	ou				
	√ No	_					
	ت ا	s. Give specific i	nformation		F	ederal:	\$0.00
		out them, includir				•	
	•	already filed the			8	State:	\$0.00
	and	the tax years			L	ocal:	\$0.00
29.	-	support					
		les: Past due or	lump sum alimony, spo	ousal support, child supp	port, maintenance, divorce settlement, p	roperty	settlement
	✓ No ☐ Yes	s. Give specific i	nformation		Alimony:		\$0.00
		·			Maintenance	:	\$0.00
					Support:	•	\$0.00
					Divorce settl	ement:	\$0.00
					Property sett		
					r roporty don		Ψ0.00
30.			es, disability insurance	payments, disability berefits; unpaid loans you r	nefits, sick pay, vacation pay, workers' made to someone else		
	⋈ No		•				
	<u>-</u>	s. Give specific i	nformation				
31.	Interes	ts in insurance	policies				
	Examp	les: Health, disal	bility, or life insurance;	health savings account	(HSA); credit, homeowner's, or renter's	insuran	ce
	√ No						
	Yes	s. Name the insu	ırance				
		npany of each po	•			_	
	and	d list its value	Company na	me:	Beneficiary:	Sur	render or refund value:
32.	If you a	re the beneficiar			ed nsurance policy, or are currently		
	⋈ No		•				
		s. Give specific i	nformation			_	
22	Claima	against third no	artica whathar ar not	you have filed a laws	uit or made a demand for navment		
აა.		-		nsurance claims, or right	it or made a demand for payment ts to sue		
	☑ No						
	☐ Yes	s. Describe each	ı claim			-	
34.		contingent and use set off claims	•	f every nature, includin	g counterclaims of the debtor and		
	☑ No						
	_	s. Describe each	claim				

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 13 of 45

Deb	tor 1	James First Name	S Middle Name	Hodrick Last Name	Case number (if known)	
35.	Any fin		ou did not alread			
	✓ No	. Give specific				
36.				es from Part 4, including any e here		\$500.00
Pa	art 5:	Describe An	y Business-Ro	elated Property You Owr	n or Have an Interest In. List any	real estate in Part 1.
37.	Do you	own or have a	ny legal or equita	ble interest in any business-re	elated property?	
		Go to Part 6. Go to line 38.				
						Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accour	nts receivable o	or commissions y	ou already earned		
	✓ No ☐ Yes	. Describe				
39.		es: Business-re	nishings, and sup elated computers, s rs, electronic devices	software, modems, printers, cop	iers, fax machines, rugs, telephones,	
	✓ No ☐ Yes	. Describe				
40.	Machin	ery, fixtures, e	quipment, supplie	es you use in business, and to	ools of your trade	
	✓ No ☐ Yes	. Describe				
41.	Invento	ry				
	✓ No ☐ Yes	. Describe				
42.	Interest	s in partnersh	ips or joint ventur	res		
	✓ No ☐ Yes	s. Describe	Name of entity:		% of ownership:	
43.	Custom	ner lists, mailin	g lists, or other c	ompilations		
	✓ No ☐ Yes	. Do your lists No Yes. De	-	lly identifiable information (as	defined in 11 U.S.C. § 101(41A))?	
44.	Any bu	siness-related	property you did	not already list		
	✓ No ☐ Yes	. Give specific	information.			
45.				es from Part 5, including any e	_	\$0.00

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 14 of 45

Deb	tor 1	James	S	Hodrick	Case number (if known)	
		First Name	Middle Name	Last Name		
P	art 6:			nmercial Fishing-Rela n farmland, list it in Part	ted Property You Own or Have 1.	an Interest In.
46.	Do yo	u own or have a	ny legal or equitable	interest in any farm- or co	mmercial fishing-related property?	
	سنا	o. Go to Part 7. es. Go to line 47.				
	ш	00 10 11110 111				
						Current value of the portion you own? Do not deduct secured claims or exemptions.
47.		animals bles: Livestock r	ooultry, farm-raised fis	sh		
	✓ No)	rounty, raint raised no			
	_	·				
48.	Crops	either growing	or harvested			
		o es. Give specific ormation				
49.	Farm a	and fishing equi	pment, implements,	machinery, fixtures, and to	ools of trade	
	✓ No) es				
50.	Farm a	and fishing supp	olies, chemicals, and	l feed		
	✓ No) 9S				
51.	Any fa	rm- and comme	rcial fishing-related	property you did not alread	dy list	
	_	o es. Give specific ormation				
52.			•	rom Part 6, including any e		\$0.00
P	art 7:	Describe All	Property You O	wn or Have an Interes	t in That You Did Not List Abo	ve
53.	•	•	pperty of any kind yo	ou did not already list? nbership		
	✓ No	s. Give specific	information.			
54.	Add th	ne dollar value o	f all of your entries f	from Part 7. Write that num	ber here	\$0.00

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 15 of 45

Debtor 1	James	S	Hodrick	Case nu	ımber (if known)		
	First Name	Middle Name	Last Name				
Part 8:	List the Tota	ls of Each Part of	this Form				
55. Part 1	1: Total real estat	e, line 2				·	\$0.00
56. Part 2	2: Total vehicles,	line 5	-	\$0.00			
57. Part 3	3: Total personal	and household items,	line 15	\$700.00			
58. Part 4	4: Total financial	assets, line 36	-	\$500.00			
59. Part 5	5: Total business	-related property, line	45 _	\$0.00			
60. Part 6	6: Total farm- and	l fishing-related prope	rty, line 52	\$0.00			
61. Part 7	7: Total other pro	perty not listed, line 5	4 +-	\$0.00			
62. Total	personal propert	y. Add lines 56 throu	gh 61	\$1,200.00	Copy personal property total	+	\$1,200.00
63. Total	of all property or	n Schedule A/B. Add	d line 55 + line 62				\$1,200.00

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 16 of 45

Debtor 1	James	S	Hodrick				
Debtor i	First Name	Middle Name					
Debtor 2 (Spouse, if filing)	First Name	Middle Name	e Last Name				
United States Ba	nkruptcy Court fo	r the: NORTHE	RN DISTRICT OF I	LLINOI	S	ПС	heck if this is an
Case number (if known)						_	mended filing
Official Form	106C						
Schedule C	: The Prope	erty You Cl	aim as Exemp	ot			(
Using the property	you listed on Schill out and attach t	nedule A/B: Properto this page as m	erty (Official Form 10	6A/B) as	your source, list the	e property that	supplying correct information you claim as exempt. If top of any additional page
is to state a speci exempted up to the receive certain be exemption of 100°	ific dollar amoun ne amount of any enefits, and tax-e % of fair market	t as exempt. Al applicable stat xempt retirement value under a la	ou must specify the a ternatively, you may utory limit. Some ex nt fundsmay be unl w that limits the exe ur exemption would	claim the claim the claim tender in the claim	he full fair market nssuch as those n dollar amount. H to a particular doll	value of the propertion of the properties of the	roperty being s, rights to ou claim an d the value of the
Part 1: Ide	entify the Prop	perty You Cla	im as Exempt				
		,	uo =xopt				
1. Which set of	exemptions are		-	even if y	our spouse is filing	with you.	
✓ You are	•	you claiming? d federal nonban	-	-	your spouse is filing C. § 522(b)(3)	with you.	
You are You are	claiming state and claiming federal e	you claiming? d federal nonban exemptions. 11 L	Check one only, kruptcy exemptions.	11 U.S.C	C. § 522(b)(3)	·	
You are You are You proper any proper description	claiming state and claiming federal electry you list on so of the property a	you claiming? If federal nonbanexemptions. 11 USChedule A/B than the contract of the contract	Check one only, kruptcy exemptions. J.S.C. § 522(b)(2)	11 U.S.C npt, fill i Amour	C. § 522(b)(3)	below.	vs that allow exemption
You are You are	claiming state and claiming federal electry you list on so of the property a	you claiming? If federal nonbanexemptions. 11 USChedule A/B than the contract of the contract	Check one only, kruptcy exemptions. J.S.C. § 522(b)(2) at you claim as exer Current value of the portion you	npt, fill i Amour exemp	in the information of the of t	below.	vs that allow exemption
You are You ar	claiming state and claiming federal e perty you list on S of the property a t lists this proper d goods includi pom furniture	you claiming? If federal nonbanexemptions. 11 USchedule A/B thend line on arty	Check one only, kruptcy exemptions. J.S.C. § 522(b)(2) at you claim as exer Current value of the portion you own Copy the value from	npt, fill i Amour exemp Check each e.	in the information on the of the only one box for	below. Specific lav	vs that allow exemption 5/12-1001(b)
You are You are You prop For any prop	claiming state and claiming federal electry you list on so of the property at lists this property at lists this property and goods including furniture to A/B:	you claiming? If federal nonbanexemptions. 11 USchedule A/B thand line on arty	Check one only, kruptcy exemptions. J.S.C. § 522(b)(2) at you claim as exer Current value of the portion you own Copy the value from Schedule A/B	npt, fill i Amour exemp Check each e.	in the information on the of the only one box for exemption \$300.00 00% of fair market alue, up to any oplicable statutory	below. Specific lav	·

☐ Yes

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 17 of 45

Debtor 1	James First Name	S Middle Name	Hodrick Last Name	Case numbe	r (if known)
Part 2:	Additional		2501.10.110		
Brief description of the property and line on Schedule A/B that lists this property			Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Check only one box for each exemption	
Brief descri	ption: h and earring		\$200.00	\$200.00 100% of fair market	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 12		12		value, up to any applicable statutory limit	
Brief descri	•		\$500.00	\$500.00 100% of fair market	735 ILCS 5/12-1001(b)
Line from S	Schedule A/B:	16		value, up to any applicable statutory limit	

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Page 18 of 45 Document

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Column B Value of collateral Value of collateral							
First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) Check if this is an amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/19 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Unsecured	Fill in this inf	ormation to	identify your case	:			
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) Check if this is an amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/19 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Unsecured	Debtor 1	James	S	Hodrick			
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) Check if this is an amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/19 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral		First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/19 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Column A Amount of claim Value of collateral Column C Unsecured	Debtor 2						
Case number (if known) Check if this is an amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/19 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Column A Amount of claim Value of collateral Value of collateral	(Spouse, if filing)	First Name	Middle Name	Last Name			
Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/19 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Value of collateral	United States Ba	nkruptcy Court fo	or the: NORTHERN D	ISTRICT OF ILLING	ois		
Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/19 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Value of collateral	Case number						
Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Column A Amount of claim Value of collateral Column C Unsecured							
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Column A Amount of claim Value of collateral						amended min	9
Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral	Official Form	106D					
Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral	Schedule D:	Creditors	Who Have Cla	ims Secured b	v Property		12/15
correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Value of collateral					• • •		
On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Value of collateral	•		•		•		
1. Do any creditors have claims secured by your property? ☑ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. ☐ Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Column B Value of collateral Value of collateral Value of collateral		•		•		ies, and attach it to th	is form.
No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Value of collateral		aaapaga	, y can mamo an		,.		
Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Value of collateral	1. Do any credit	tors have claim	s secured by your pro	perty?			
Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Value of collateral	No. Che	ck this box and	submit this form to the	court with your other so	hedules. You have noth	hing else to report on th	nis form.
2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Unsecured		in all of the info	rmation below.	·			
2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Unsecured	_						
claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Unsecured	Part 1: Lis	t All Secured	d Claims				
claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Unsecured							
creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Unsecured							
		•	•				
		•			Do not deduct the	that supports this	portion

creditor's name.

value of collateral

claim

If any

Add the dollar value of your entries in Column A on this page. Write that number here:

\$0.00

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 19 of 45

				•		
Fill in this inf	ormation to i	dentify your c	ase:			
Debtor 1	James	S	Hodrick			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court fo	r the: NORTHER	N DISTRICT OF ILLINOIS			
Case number				_	Check if this is a	an
(if known)				_	amended filing	A11
Official Form	106E/F			_		
Schedule E/	F: Creditor	s Who Have	e Unsecured Claims			12/15
Do not include any If more space is n to this page. On t	y creditors with eeded, copy the he top of any ad	partially secured Part you need, fi Iditional pages, w	and on Schedule G: Executory Co claims that are listed in Schedule ill it out, number the entries in the rrite your name and case number of secured Claims	D: Creditors Who H boxes on the left. A	old Claims Secur	ed by Property.
1. Do any credit	tors have priorit	y unsecured clair	ns against you?			
☐ No. Go t	to Part 2.					
Yes.						
claim. For each show both price space is claim, list the	ch claim listed, ic ority and nonprior s needed for prior other creditors in	lentify what type of ity amounts. As n ity unsecured clair Part 3.	creditor has more than one priority of claim it is. If a claim has both prior nuch as possible, list the claims in a ms, fill out the Continuation Page of e instructions for this form in the inst	ity and nonpriority ame Iphabetical order acco Part 1. If more than o	ounts, list that clain	n here and or's name. If
				Total Claim	amount	amount
2.1				\$4,000.00	\$4,000.00	\$0.00
Badillo Law Gro			Last 4 digits of account number			
Priority Creditor's Nam 8745 W. Higgins			When was the debt incurred?	 06/02/2016		
Number Street			when was the dept incurred?	06/02/2016		
Suite 110			As of the date you file, the claim	is: Check all that app	ly.	
Chicago, Illinois	3		Contingent Unliquidated			
City	State	ZIP Code	Disputed			
Who incurred the			Type of PRIORITY unsecured cla	nim·		
Debtor 1 only			Domestic support obligations	••••		
Debtor 2 only	Johtor O only		you owe the governm	ent		
Debtor 1 and D At least one of	the debtors and	another	Claims for death or personal in	njury while you were		
ш	claim is for a cor		intoxicated ✓ Other. Specify			
Is the claim subject		•	Attorney fees for this cas	е		
☑ No			•			
Yes						

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 20 of 45

Debtor 1	James	S	Hodrick	Ca	ase nu	umbe	er (if k	nown)	
	First Name	Middle Name	Last Name						
Part 2:	List All of	Your NONPRIORI	TY Unsecured Claim	S					
	-								
3. Do an	y creditors have	nonpriority unsecure	d claims against you?						
П 1	No. You have not	hing to report in this par	t. Submit this form to the	court with you	u othe	r sch	edule	es.	
M A	⁄es								
_									
		•	s in the alphabetical orde						n listed identify what
			ecured claim, list the credit cluded in Part 1. If more th						·
		•	unsecured claims, fill out				•		the other creditors in
		,				- 3 -			
									Total claim
4.1									\$4,116.00
Canital O	ne Bank USA N	JΔ	Last 4 digits of accou	nt number	9	2	6	8	<u> </u>
	reditor's Name	4.74.	When was the debt in				_	<u> </u>	
PO BOX 3				-	- 01		- 11 (1	t and by	
Number	Street		As of the date you file	, the claim i	s: Ch	еск а	all tha	at apply.	
-									
			— ☐ Disputed						
SALT LAI	KE CITY	UT 84130	'						
City Who incur	red the debt?	State ZIP Code Check one.	Type of NONPRIORIT	Y unsecured	d clair	n:			
Debtor		Check one.	☐ Student loans						
☐ Debtor	•		Obligations arising			_	eeme	ent or divorce	
	1 and Debtor 2 o	nly	that you did not rep Debts to pension of				nd of	har similar daht	to
At leas	t one of the debto	ors and another	Other. Specify	i pioni-snam	iy pia	1115, 0	iiiu oi	iller Sillillar debi	.5
☐ Check	if this claim is fo	or a community debt	Credit Card						
Is the clair	n subject to offs	et?							
☑ No	-								
Yes									
4.2									\$145.00
	ent Outsourcin	g	Last 4 digits of accou	nt number	_5_	3_	2	_4_	
Nonpriority C	reditor's Name		When was the debt in	curred?					
Number	Street		As of the date you file	, the claim i	s: Ch	eck a	all tha	at apply.	
			Contingent						
			Unliquidated						
Renton		WA 98057	─ ☐ Disputed						
City		State ZIP Code	Type of NONPRIORIT	V unsacurac	l clair	m·			
	red the debt?	Check one.	Student loans	i unocource	. Oluli				
✓ Debtor			Obligations arising	out of a sepa	aratio	n aar	eeme	ent or divorce	
Debtor	•	m.l	that you did not rep			_			
=	1 and Debtor 2 o	•	Debts to pension of				and ot	her similar debt	ts
_	st one of the debto		✓ Other. Specify						
_		or a community debt	Collecting for -	Comcast					
	n subject to offs	et?							
☑ No									
☐ Yes									

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 21 of 45

Debtor 1	James	S	Hodrick	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 2:	Your NO	NPRIORITY Unsecu	red Claims Conti	nuation Page	
				_	
After listing previous previous	•	on this page, number the	m sequentially from the	1	Total claim
	9				
4.3					\$3,000.00
		ınicipal District Ct	_ Last 4 digits of acco	 	
Nonpriority Creditor's Name 16501 Kedzie Pkwy			When was the debt in	ncurred?	
Number	Street			e, the claim is: Check all that apply.	
			_ ☐ Contingent ☐ Unliquidated		
			Disputed		
Markham	1	IL 60428			
City Who incur	red the debt?	State ZIP Code Check one.	Type of NONPRIORI	ΓY unsecured claim:	
	r 1 only	Chicon chici	Student loans	a cut of a concretion agreement or diverse	
	r 2 only			g out of a separation agreement or divorce	
Debtor	r 1 and Debtor 2	? only	•	or profit-sharing plans, and other similar debts	
☐ At leas	st one of the deb	otors and another	Other. Specify	or prom onaming prane, and office office access	
☐ Check	t if this claim is	for a community debt		driver's license suspension	
	m subject to of	fset?			
☑ No					
☐ Yes					
Debtor's	driver's licen	se is suspended.			
4.4					\$0.00
DuPage (County Clerk		Last 4 digits of acco	unt number 3 2 8 9	Ψ0.00
	Creditor's Name		When was the debt in		
	unty Farm Ro	t e e e e e e e e e e e e e e e e e e e			
Number	Street		_	le, the claim is: Check all that apply.	
			_ ☐ Contingent ☐ Unliquidated		
			−		
Wheaton City		IL 60187 State ZIP Code			
	red the debt?	Check one.	Type of NONPRIORI	TY unsecured claim:	
	r 1 only	0.1001X 0.101	Student loans	a cut of a conception correspond or diverse	
	r 2 only			g out of a separation agreement or divorce eport as priority claims	
	r 1 and Debtor 2	? only	•	or profit-sharing plans, and other similar debts	
At leas	st one of the deb	otors and another	Other. Specify	or profit sharing plans, and other similar debts	
☐ Check	t if this claim is	for a community debt	<u> </u>	driver's license suspension	
Is the clair	m subject to of	fset?		-	
☑ No					
☐ Yes					
Driver's I	icense suspe	ension			

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 22 of 45

Debtor 1	James	S	Hodrick Case numb	per (if known)
	First Name	Middle Name	Last Name	
Part 2:	Vour NO	NDDIODITY Uncocu	red Claims Continuation Page	
rait 2.	Tour NO	NEKIOKII I UIISECU	red Claims Continuation Fage	
After listin	ng anv entries o	on this page, number the	m sequentially from the	
previous p				Total claim
<u> </u>	9			
4.5				\$1,389.00
Enhance	d Recovery C	omnany	Last 4 digits of account number 8 1	1 5
	Creditor's Name	ompany	- <u> </u>	<u> </u>
PO BOX	57547		When was the debt incurred?	
Number	Street		As of the date you file, the claim is: Check	call that apply.
			_ Contingent	
			☐ Unliquidated	
	•••	=1 00044	Disputed	
Jackson	ville	FL 32241	_	
City	۵۲مامله مماه لممس	State ZIP Code	Type of NONPRIORITY unsecured claim:	
	red the debt?	Check one.	Student loans	
뜨 ~	r 1 only		Obligations arising out of a separation ag	greement or divorce
ш.	r 2 only		that you did not report as priority claims	
≝	r 1 and Debtor 2	•	□ Debts to pension or profit-sharing plans,	and other similar debts
☐ At leas	st one of the deb	tors and another	Other. Specify	
☐ Check	t if this claim is	for a community debt	Collecting for - Sprint	
Is the clair	m subject to off	set?	.	
☑ No	,			
Yes				
4.6				\$8,650.00
	. O'Rourke Creditor's Name		_ Last 4 digits of account number <u>3</u> <u>2</u>	_ <u>8 9</u>
Attorney	_		When was the debt incurred?	
Number	Street		As of the date you file, the claim is: Check	call that apply.
	ckson Blvd. #2	240	_	
			Unliquidated	
			- ☐ Disputed	
Chicago		IL 60604		
City		State ZIP Code	Type of NONPRIORITY unsecured claim:	
	red the debt?	Check one.	☐ Student loans	
<u>-</u>	r 1 only		Obligations arising out of a separation ag	greement or divorce
ш	r 2 only		that you did not report as priority claims	9
☐ Debtor	r 1 and Debtor 2	only	Debts to pension or profit-sharing plans,	and other similar debts
At leas	st one of the deb	tors and another	Other. Specify	22 22 2
☐ Check	if this claim is	for a community debt	Attorney for - Village of Forest Par	rk
Is the clain	m subject to off	set?		
☑ No				
Yes				
Driver's I	icense suspe	nsion		

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 23 of 45

Debtor 1	James	S	Hodrick	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 2:	Your NON	PRIORITY Unsecur	ed Claims Continuati	ion Page	
After listin	• •	this page, number the	n sequentially from the		Total claim
4.7					\$554.00
Nonpriority C	st Credit Syste reditor's Name ERNATIONAL F Street		Last 4 digits of account no When was the debt incurre As of the date you file, the Contingent Unliquidated		
CARROLLTON TX 75007 City State ZIP Code Who incurred the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ No ☐ Yes			Type of NONPRIORITY under Student loans Obligations arising out of that you did not report at Debts to pension or pro Other. Specify Collecting for - Com		

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 24 of 45

Debtor 1	James	S Middle News	Hodrick	Case number (if known)				
	First Name	Middle Name	Last Name					
Part 3:	List Others	s to Be Notified Abo	out a Debt That You Alread	y Listed				
For ex credit debts	his page only if y xample, if a collector in Parts 1 or 2 that you listed ir	ou have others to be no ction agency is trying to , then list the collection	tified about your bankruptcy, for collect from you for a debt you agency here. Similarly, if you h ditional creditors here. If you de	r a debt that you already listed in Parts 1 or 2. owe to someone else, list the original save more than one creditor for any of the o not have additional parties to be notified for				
	cott Harris, P.C.		On which entry in Part 1 or	Part 2 did you list the original creditor?				
Name Attorneys	s at Law		Line of (Check one)	Part 1: Creditors with Priority Unsecured Claims				
Number 111 West	Street Jackson Blvd.	Suite 600	Attorneys for- The City of Chicago	Part 2: Creditors with Nonpriority Unsecured Claims				
Chicago City		IL 60604 State ZIP Code	— Last 4 digits of account nur	nber <u>3 2 8 9</u>				
City of Ch	nicago		On which entry in Part 1 or	Part 2 did you list the original creditor?				
_{Name} Departme	ent of Revenue		Line of (Check one)	: Part 1: Creditors with Priority Unsecured Claims				
Number BUREAU	Street OF PARKING-E	BANKRUPTCY	Parking Tickets	Part 2: Creditors with Nonpriority Unsecured Claims				
	Salle St. #107A		— Last 4 digits of account nun	nhor 2 2 9 0				
Chicago		IL 60602	Last 4 digits of account hun	nber <u>3 2 8 9</u>				
City Driver's L	₋icense Suspen	State ZIP Code Sion						
	nicipal District		On which entry in Part 1 or	Part 2 did you list the original creditor?				
Name 50 West V	Washington Str	eet	Line of (Check one)	: Part 1: Creditors with Priority Unsecured Claims				
Number Richard J	Street J. Daley Center		Failure to pay- driver's Part 2: Creditors with Nonpriority Unsecured Claim Idense suspension					
Office of	the Presiding J	udge - Suite 13	Last 4 digits of account nur	nber 3 2 8 9				
Chicago City		IL 60602 State ZIP Code		<u> </u>				
•	icense suspens							
Fourth M	unicipal Distric	t	On which entry in Part 1 or	Part 2 did you list the original creditor?				
Name Maywoo d	d Courthouse		Line of (Check one)	Part 1: Creditors with Priority Unsecured Claims				
Number Office of	Street the Presiding J	udge Ste. 131	Failure to pay- driver's	Part 2: Creditors with Nonpriority Unsecured Claims				
	brook Drive		license suspension	nhar 2 2 0 0				
Maywood City	d	IL 60153 State ZIP Code	Last 4 digits of account nun	nber <u>3 2 8 9</u>				
-	icense suspens							
Second N	/lunicipal Distri	ot	On which entry in Part 1 or	Part 2 did you list the original creditor?				
	ourthouse		Lineof (Check one)	Part 1: Creditors with Priority Unsecured Claims				
Number 5600 Old	Street Orchard Road		Failure to pay- driver's	Part 2: Creditors with Nonpriority Unsecured Claims				
	the Presiding J	udge - Suite 21	license suspensionLast 4 digits of account nun	nher 3 2 8 0				
Skokie		IL 60077		nber <u>3 2 8 9</u>				
^{City} Driver's li	icense suspens	State ZIP Code						

Debtor 1

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Page 25 of 45 Document

Hodrick

Debtor 1	James	•	3	Hodrick	Case number (if known)
	First Name	N	/liddle Name	Last Name	
Part 3:	List Othe	rs to B	e Notified Ab	oout a Debt That You Alrea	ndy Listed Continuation Page
	y of State			On which entry in Part 1 o	or Part 2 did you list the original creditor?
Name Traffic Vi	iolations Sect	ion		Line of (Check on	e):
Number	Street	1011		License Suspension	
2701 S. D	Dirksen Pkwy.			——	Part 2: Creditors with Nonpriority Unsecured Claims
				—— Last 4 digits of account n	umber 3 2 8 9
Springfie	eld	IL	62723	Last 4 digits of account in	
City		State	ZIP Code		
Driver's I	license suspe	nsion dı	ue to Failure to	o pay tickets, traffice tickets	from Forest Park.
Village of Name	f Forest Park			On which entry in Part 1 o	or Part 2 did you list the original creditor?
	olaines Ave			Line of (Check on	e): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Parking Tickets	Part 2: Creditors with Nonpriority Unsecured Claims
				<u> </u>	
				Last 4 digits of account n	umber 3 2 8 9
Forest Pa	ark	IL	60130		<u> </u>
City		State	ZIP Code		
Parking t	tickets- driver	's licens	e suspended	due to tickets.	
	f Markham			On which entry in Part 1 o	or Part 2 did you list the original creditor?
Name 16313 S.	Kedzie Parkw	av		Line of (Check on	e):
Number	Street			Tickets	
				<u></u>	Part 2: Creditors with Nonpriority Unsecured Claims
				Last 4 digits of account n	umber <u>3 2 8 9</u>
Markham	n	IL	60428		<u> </u>
City		State	ZIP Code		
	f Maywood			On which entry in Part 1 o	or Part 2 did you list the original creditor?
Name 125 S 5th	n Ave.			Line of (Check on	e):
Number	Street			Tickets	Part 2: Creditors with Nonpriority Unsecured Claims
				<u> </u>	T art 2. Greditors with Northholity Offsecured Glaims
				—— Last 4 digits of account n	umber 3 2 8 0
Maywoo	d	IL	60153	Last 4 digits of account in	umber <u>3 2 8 9</u>
City		State	ZIP Code		
Driver's I	license suspe	nsion			
Village of	f Skokie			On which entry in Part 1 o	or Part 2 did you list the original creditor?
Name 7300 Nile	es Center Rd			Line of (Check on	e):
Number	Street			Tickets	
					Part 2: Creditors with Nonpriority Unsecured Claims
				— Last 4 digits of account n	umher 3 2 8 Q
Skokie		IL	60077	Last + digits of account in	umber <u>3 2 8 9</u>
City		State	ZIP Code		

James

S

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 26 of 45

Debtor 1	James	S	Hodrick	Case number (if known)	
	First Name	Middle Name	Last Name		

Part 4: Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only.
 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
nom ratt i	6b.	Taxes and certain other debts you owe the government	6b.	\$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. +	\$4,000.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$4,000.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts		6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	^{6i.} +	\$17,854.00
	6j.	Total. Add lines 6f through 6i.	6j.	\$17,854.00

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 27 of 45

Fill in this inf	ormation to ider									
Debtor 1	James First Name	S Middle Name	Hodrick Last Name							
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name							
United States Ba	United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS									
Case number (if known)					Check if this is an amended filing					

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease
 is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of
 executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 28 of 45

Fi	ill in this info	ormation to id	entify your case	:			
De	ebtor 1	James	S	Hodrick			
		First Name	Middle Name	Last Name			
	ebtor 2						
(S	pouse, if filing)	First Name	Middle Name	Last Name			
Ur	nited States Bar	nkruptcy Court for	the: NORTHERN D	ISTRICT OF ILLINOIS			
	ase number					Check if this is an	
(if	known)					amended filing	
					_		
Of	ficial Form	106H					
		Your Code	htors				12/1
	ilouulo III.	1001 0000	5.010				
two nee	married peopl ded, copy the <i>i</i> e. On the top o	e are filing togetl Additional Page,	her, both are equally fill it out, and numbe Pages, write your n	any debts you may have. Be responsible for supplying coer the entries in the boxes on ame and case number (if known and case, do not list either spous	orrect information. If r the left. Attach the Ad wn). Answer every qu	nore space is Iditional Page to this	
	✓ No Yes						
2.		a, California, Idah		nity property state or territory , New Mexico, Puerto Rico, Tex		-	
	Yes. Did	your spouse, form	ner spouse, or legal e	quivalent live with you at the tin	ne?		
3.	person shows creditor on S	n in line 2 again a chedule D (Offici	as a codebtor only if	ude your spouse as a codebt that person is a guarantor or dule E/F (Official Form 106E/I tt Column 2.	cosigner. Make sure	you have listed the	

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 29 of 45

G	ill in this inforn	nation to identif	y your case:					
	Debtor 1	James	S	Hodrick				
		First Name	Middle Name	Last Name			Che	eck if this is:
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				An amended filing
	, 0,	ruptcy Court for the:	NORTHERN	DISTRICT OF IL	LINOIS	;		A supplement showing postpetition
	Case number		-		_			chapter 13 income as of the following date:
	(if known)							MM / DD / YYYY
0	fficial Form 10	<u>)61</u>						
S	chedule I: Yo	ur Income						12/15
res inc abo you	sponsible for suppl lude information al out your spouse. If ur name and case r	ying correct inform bout your spouse. more space is nee	ation. If you are If you are separa ded, attach a se Answer every q	married and not ated and your spo parate sheet to th	filing jo ouse is r	intly, and not filing	your with y	I Debtor 2), both are equally spouse is living with you, ou, ou, do not include information any additional pages, write
1.	Fill in your emplo	pyment		Debtor 1				Debtor 2 or non-filing spouse
	If you have more t		yment status	Employed				☐ Employed
	with information al	bout	ymoni olalao	☐ Not employe	ed			☐ Not employed
	additional employe	ers. Occup	ation	Loading				
	Include part-time, or self-employed v		yer's name	REM, Inc.				
	Occupation may in student or homem applies.	=p.,	yer's address	7239 W Roose Number Street	velt Ro	İ		Number Street
				Forest Park	IL			
				City		tate Zip C	ode	City State Zip Code
		How I	ong employed th	nere? 2 mont	115			
F	Cart 2: Give D	Details About Mo	onthly Income	е				
	timate monthly inco			n. If you have noth	ing to re	port for ar	ny line	, write \$0 in the space. Include your
lf y	٠.	spouse have more	han one employe	er, combine the info	ormation	for all em	ploye	rs for that person on the lines below. If
					F	or Debtor	1	For Debtor 2 or non-filing spouse
2.		ss wages, salary, a			2.	\$1,69	8.23	
3.	Estimate and list	monthly overtime	oay.		3. +	\$21	6.67	
4.	Calculate gross i	ncome. Add line 2	+ line 3.		4.	\$1,91	4.90	

Official Form 106l Schedule I: Your Income page 1

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 30 of 45

Deb	otor 1	James	S	Hodrick		Case nu	ımber (if kno	wn)			
		First Name	Middle Name	Last Name							
					Fo	or Debtor 1	For Deb non-filin	tor 2 or ng spouse	<u>!</u>		
	Сор	y line 4 here		→	4.	\$1,914.90					
5.	List	all payroll dedu	ctions:		-						
			and Social Security de	eductions	5a.	\$130.00					
	5b.	Mandatory con	tributions for retireme	nt plans	5b.	\$0.00					
			ibutions for retiremen	-	5c.	\$0.00					
		-	ments of retirement fu	-	5d.	\$0.00					
		Insurance			5e.	\$0.00					
	5f.	Domestic supp	ort obligations		5f.	\$0.00					
	5g.	Union dues	· ·		5g.	\$0.00					
	5h.	Other deduction	ns.								
		Specify: Trave			5h. +	\$86.67					
6.		I the payroll ded - 5h.	uctions. Add lines 5a	a + 5b + 5c + 5d + 5e + 5f +	6.	\$216.67					
7.			hly take-home pay.	Subtract line 6 from line 4.	7.	\$1,698.23					
8.			e regularly received: m rental property and	from operating a	8a.	\$0.00					
		business, profe	ession, or farm		-	· ·					
			ent for each property an	d business showing business expenses, and							
		the total monthly		business expenses, and							
	O.L.	Interest and div			Oh	¢0.00					
	_			non filing chause, or a	8b.	\$0.00					
	8c.	dependent regu		non-filing spouse, or a	8c. <u>-</u>	\$0.00					
		•	spousal support, child ent, and property settlen								
	8d.	Unemployment	compensation		8d.	\$0.00					
	8e.	Social Security			8e.	\$0.00	-				
	8f.	Other governme	ent assistance that yo	u regularly receive	-	· · · · · · · · · · · · · · · · · · ·					
		Include cash ass	sistance and the value (if known) or any non-							
		cash assistance	that you receive, such	as food stamps							
				ion Assistance Program)							
		or housing subsi	idies.								
		Specify:			_ 8f. 	\$0.00					
	_	Pension or retir			8g.	\$0.00					
	8h.	Other monthly i Specify:	income.		8h. 🛨	\$0.00					
									1		
9.	Add	l all other income	e. Add lines 8a + 8b +	8c + 8d + 8e + 8f + 8g + 8h.	9.	\$0.00			j		
10.	Cald	culate monthly in	ncome. Add line 7 + lir	ne 9.	10.	\$1,698.23	+		_[\$1,698.2	23
	Add	the entries in line	e 10 for Debtor 1 and De	ebtor 2 or non-filing spouse.	L				L		_
11.	11. State all other regular contributions to the expenses that you list in Sinclude contributions from an unmarried partner, members of your house friends or relatives.		ichedule nold, your	J. dependents, yo	ur roommate	es, and oth	ner				
	Do not include any amounts already included in lines 2-10 or amount		d in lines 2-10 or amounts that	at are not	available to pav	expenses li	sted in Sc	hedu	le J.		
		cify:					•	11.		\$0.0	00
12.	Add	I the amount in t	he last column of line	10 to the amount in line 11.	The res	ult is the combin	ed monthly	12.		\$1,698.2	23
	inco			of Your Assets and Liabilities						ombined	
									IT	nonthly inco	me

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 31 of 45

Debtor 1		James	S	Hodrick	Case number (if known)					
		First Name	Middle Name	Last Name						
13. D	13. Do you expect an increase or decrease within the year after you file this form?									
v	Z	No.	None.							
		Yes. Explain:								

Official Form 106l Schedule I: Your Income page 3

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 32 of 45

F	ill in this inform	nation to ide	ntify your case:			Ch-	ck if this	, io:	
	Debtor 1	James	S	Hodri	ick			s is: ended filing	
		First Name	Middle Name	Last Na			A supp	lement showing r 13 expenses a	
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Na	ame			ng date:	0 01 1110
	United States Bankı	ruptcy Court for	the: NORTHERN	DISTRICT O	F ILLINOIS		MM / D	D / YYYY	
	Case number (if known)								
Of	ficial Form 10	<u> 165</u>							
Sc	chedule J: Yo	our Expen	ses						12/1
cor nar	rect information. I	f more space is	s needed, attach ano Answer every questi	ther sheet to t	ling together, both ar this form. On the top				
_			useriola						
1.	_ No	e 2. Debtor 2 live in	a separate househol		s for Separate Housel	hold of	f Debtor	2.	
2.	Do you have depo		No✓ Yes. Fill out this		Dependent's relation		p to	Dependent's	Does depender
	Debtor 2.	i anu	for each depende	ent	. Debtor 1 or Debtor Child			age 8	live with you? ✓ No
	Do not state the donames.	ependents'			Child			4	- ☐ Yes ☑ No - ☐ Yes
					Child			6 months	
3.	Do your expense expenses of peop yourself and you	ole other than	√ No □ Yes						□ No - □ Yes
			going Monthly Ex		re using this form as	s a su	nnlemer	nt in a Chapter	13 case
to r		of a date after	the bankruptcy is fil		supplemental Sche				
			cash government ass t on Schedule I: You	-				Your expens	ses
4.			expenses for your res				4	4	\$500.00
	If not included in	line 4:	_						
	4a. Real estate ta	axes					4	4a	
	4b. Property, hon	neowner's, or re	enter's insurance				4	4b	
	4c. Home mainte	nance, repair, a	and upkeep expenses				4	4c	
	4d. Homeowner's	association or	condominium dues					4d.	

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 33 of 45

Case number (if known)

Hodrick

Middle Name First Name Last Name Your expenses Additional mortgage payments for your residence, such as home equity loans 5. **Utilities:** 6. 6a. Electricity, heat, natural gas 6a. \$50.00 6b. Water, sewer, garbage collection 6b. 6c. Telephone, cell phone, Internet, satellite, and \$100.00 6c. cable services 6d. Other. Specify: 6d. Food and housekeeping supplies 7. \$400.00 Childcare and children's education costs 8. 8. Clothing, laundry, and dry cleaning 9. \$60.00 10. Personal care products and services 10. \$40.00 11. Medical and dental expenses 11. \$25.00 12. Transportation. Include gas, maintenance, bus or train 12. \$175.00 fare. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, 13. \$15.00 magazines, and books 14. Charitable contributions and religious donations 14. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. 15b. Health insurance 15b. 15c. Vehicle insurance 15c. 15d. Other insurance. Specify: 15d. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a. 17b. Car payments for Vehicle 2 17b. 17c. 17c. Other. Specify: 17d. Other. Specify: 17d. 18. Your payments of alimony, maintenance, and support that you did not report as 18. \$150.00 deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Child support 19. Other payments you make to support others who do not live with you. 19. Specify:

Debtor 1 James

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 34 of 45

Deb	tor 1	James	S	Hodrick	Case number (if knowr	n)
		First Name	Middle Name	Last Name		
20.		er real property e edule I: Your Inc		lines 4 or 5 of this form or c	on	
	20a.	Mortgages on	other property		20a.	
	20b.	Real estate tax	ces		20b.	
	20c.	Property, home	eowner's, or renter's insurar	nce	20c.	
	20d.	Maintenance,	repair, and upkeep expense	es	20d.	
	20e.	Homeowner's	association or condominium	20e.	-	
21.	Othe	er. Specify:			21.	+
22.	Calc	ulate your mont	thly expenses.	_		
	22a.	Add lines 4 thr	ough 21.		22a. -	\$1,515.00
	22b.	Copy line 22 (r	nonthly expenses for Debto	or 2), if any, from Official Form	n 106J-2. 22b.	
	22c.	Add line 22a a	and 22b. The result is your r	monthly expenses.	22c.	\$1,515.00
23.	Calc	ulate your mon	thly net income.			
	23a.	Copy line 12 (y	your combined monthly inco	ome) from Schedule I.	23a.	\$1,698.23
	23b.	Copy your mor	nthly expenses from line 22	c above.	23b. -	\$1,515.00
	23c.		monthly expenses from you our monthly net income.	r monthly income.	23c.	\$183.23
24.	Do y	ou expect an in	crease or decrease in you	ur expenses within the year	after you file this form?	
		example, do you nent to increase				
		No. Yes. Explain he				

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Page 35 of 45 Document

Fill in this information to identify your case:						
James	S Middle Norse	Hodrick				
First Name	Middle Name	Last Name				
First Name	Middle Name	Last Name				
nkruptcy Court fo	or the: NORTHERN D	ISTRICT OF ILLING	DIS			
Case number Check if						
	James First Name First Name	James S First Name Middle Name First Name Middle Name	James S Hodrick First Name Middle Name Last Name			

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying

cor	rect information. Fill out all of your schedules first; then complete the information on this form. If you are filing the second	g amended
Р	art 1: Summarize Your Assets	
		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	•
	1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$1,200.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$1,200.00
Р	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$4,000.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$17,854.00
	Your total liabilities	\$21,854.00
P	art 3: Summarize Your Income and Expenses	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$1,698.23
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$1,515.00

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 36 of 45

Debtor 1		James	S	Hodrick	Case number (if known)		
		First Name	Middle Name	Last Name			
Pa	art 4:	Answer T	hese Questions fo	r Administrative a	nd Statistical Records		
6.	Are yo	u filing for ban	kruptcy under Chapter	s 7, 11, or 13?			
	 No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. ✓ Yes 						
7.	What k	aind of debt do	you have?				
	-		•		re those "incurred by an individual primarily for a p 8-9g for statistical purposes. 28 U.S.C. § 159.	personal,	
	_		ot primarily consumer urt with your other sche		ing to report on this part of the form. Check this b	ox and submit	
8.			of Your Current Monthline 11; OR, Form 122B	•	otal current monthly income from	\$2,000.00	

Total claim

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Fro	From Part 4 on Schedule E/F, copy the following:						
9a.	Domestic support obligations. (Copy line 6a.)	\$0.00					
9b.	Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00					
9c.	Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00					
9d.	Student loans. (Copy line 6f.)	\$0.00					
9e.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00					
9f.	Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$0.00					
9g.	Total. Add lines 9a through 9f.	\$0.00					

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 37 of 45

Fill in this inf	ormation to i	dentify your case	:	
Debtor 1	James First Name	S Middle Name	Hodrick Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court fo	r the: NORTHERN D	ISTRICT OF ILLINOIS	
Case number (if known)				☐ Check if this is an amended filing
Official Form	106Dec			
Declaration	About an I	ndividual Debt	or's Schedules	12/15
	sonment for up	to 20 years, or both.	18 U.S.C. §§ 152, 1341, 1	519, and 3571.
		someone who is NOT	an attorney to help you	fill out bankruptcy forms?
√ No				
Yes. Na	ame of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalt true and corr		clare that I have read	the summary and sched	lules filed with this declaration and that they are
X /s/ James			X Circoture of Dobto	-2
James S F	lodrick, Debtor 1		Signature of Debto	1 2

Date 08/16/2016

MM / DD / YYYY

Date

MM / DD / YYYY

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 38 of 45

F	ill in this inf	ormation to i	dentify your case:					
D	ebtor 1	James First Name	S Middle Name	Hodrick Last Name				
	ebtor 2 Spouse, if filing)	First Name	Middle Name	Last Name				
	-			ISTRICT OF ILLINOIS	5			
С	ase number known)					_	neck if this is an	
Of	ficial Form	107						
			Affairs for Ind	ividuals Filing f	or Bankruptcy			04/16
			own). Answer every out Your Marital S	question. tatus and Where Y	ou Lived Before			
1.	What is your ☐ Married ☑ Not marrie	current marital s	status?					
2.	2. During the last 3 years, have you lived anywhere other than where you live now? ✓ №							
3.	Within the las	st 8 years, did yo	ou ever live with a spo	use or legal equivalent	t in a community prope Louisiana, Nevada, New	•	•	as,
	✓ No ☐ Yes. Mak	e sure you fill out	Schedule H: Your Cod	debtors (Official Form 10	06H).			

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 39 of 45

Debto	Debtor 1 James S First Name Middle Name		Hodrick Case nur Last Name		mber (if known)		
Pa	rt 2:	Explain th	e Sources of Y	our Income			
	Fill in th	ne total amount	of income you rece	nent or from operating a bu ived from all jobs and all bus income that you receive toge	inesses, including par	t-time activities.	endar years?
	□ No ☑ Ye	s. Fill in the det	ails.				
				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions
		ary 1 of the curi u filed for bank	•	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$10,500.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	
		calendar year: o December 31,		✓ Wages, commissions, bonuses, tips☐ Operating a business	\$6,761.00		
		endar year befo					
;	Include unemp	income regardl loyment; and oth mbling and lotte	ess of whether that her public benefit pa	g this year or the two previ income is taxable. Example ayments; pensions; rental inc are in a joint case and you h	es of other income are come; interest; dividen	ds; money collected from law	suits; royalties;
	☑ No		•	om each source separately. [Do not include income	that you listed in line 4.	

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 40 of 45

Deb	otor 1	James	S Middle Norse	Hodrick	Case number (if known)	
		First Name	Middle Name	Last Name		
P	art 3:	List Ce	rtain Payments You	Made Before You	Filed for Bankruptcy	
ô.	Are eith	er Debtor	1's or Debtor 2's debts pr	imarily consumer debt	ss?	
	□ No.		Debtor 1 nor Debtor 2 has by an individual primarily		debts. Consumer debts are defined in 11 U.S.C. § 101(8) as r household purpose."	
		During th	ne 90 days before you filed	for bankruptcy, did you	pay any creditor a total of \$6,425* or more?	
		☐ No.	Go to line 7.			
		☐ Yes.	total amount you paid that	creditor. Do not includ	of \$6,425* or more in one or more payments and the e payments for domestic support obligations, such as ayments to an attorney for this bankruptcy case.	
		* Subjec	t to adjustment on 4/01/19	and every 3 years after	that for cases filed on or after the date of adjustment.	
	∀ Yes	. Debtor	or Debtor 2 or both have	e primarily consumer o	lebts.	
		During th	ne 90 days before you filed	for bankruptcy, did you	pay any creditor a total of \$600 or more?	
		✓ No.	Go to line 7.			
		Yes.		ayments for domestic so	of \$600 or more and the total amount you paid that upport obligations, such as child support and alimony. his bankruptcy case.	
7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations such as child support and alimony.					
	✓ No ☐ Yes	. List all pa	yments to an insider.			
3.		l year befo ed an insid		y, did you make any p	ayments or transfer any property on account of a debt that	
	Include	payments o	on debts guaranteed or cos	igned by an insider.		
	✓ No ☐ Yes	. List all pa	yments that benefited an i	nsider.		

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 41 of 45

Debtor 1		James	S	Hodrick	Case number (if known)	
		First Name	Middle Name	Last Name		
9.	List all s	year before yo	u filed for bankrup uding personal inju		y lawsuit, court action, or administrative proceeding? s, divorces, collection suits, paternity actions, support or custody	
10.	Within 1	. Fill in the detai year before yo or levied?		otcy, was any of your prope	erty repossessed, foreclosed, garnished, attached,	
	Check a		fill in the details be	low.		
11.	. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?					
	✓ No ☐ Yes	. Fill in the detai	ls.			
12.				otcy, was any of your prope ustodian, or another officia	erty in the possession of an assignee for the benefit of I?	
	✓ No ☐ Yes					
P	art 5:	List Certain	Gifts and Cor	tributions		
13.	Within 2	years before y	ou filed for bankru	ıptcy, did you give any gifts	s with a total value of more than \$600 per person?	
	✓ No ☐ Yes	. Fill in the detai	ls for each gift.			
14.	Within 2 to any c	-	ou filed for bankru	ıptcy, did you give any gift	s or contributions with a total value of more than \$600	
	✓ No ☐ Yes	. Fill in the detai	ls for each gift or co	ontribution.		
P	art 6:	List Certain	Losses			
15.		year before yo saster, or gamb		otcy or since you filed for b	ankruptcy, did you lose anything because of theft, fire,	
	✓ No ☐ Yes	. Fill in the detai	ls.			

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 42 of 45

Debtor 1		James	S	Hodrick	Case number (if known)			
		First Name	Middle Name	Last Name				
Pa	art 7:	List Certain I	Payments or Tran	ısfers				
16.	16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?							
		any attorneys, ban	kruptcy petition prepar	ers, or credit counseli	ng agencies for services required for your bankruptcy.			
	✓ No ☐ Yes	s. Fill in the details.						
17.	anyone	who promised to	help you deal with ye	our creditors or to ma	se acting on your behalf pay or transfer any property to ake payments to your creditors?			
		nclude any paymer	nt or transfer that you l	isted on line 16.				
	✓ No ☐ Yes	s. Fill in the details.						
18.		•		, did you sell, trade, o your business or fin	or otherwise transfer any property to anyone, other than ancial affairs?			
Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your Do not include gifts and transfers that you have already listed on this statement.								
	✓ No ☐ Yes	s. Fill in the details.						
19.		-	•	ey, did you transfer ar ad asset-protection dev	ny property to a self-settled trust or similar device of which rices.)			
	✓ No ☐ Yes	s. Fill in the details.						
Pa	art 8:	List Certain I	Financial Accoun	ts, Instruments, S	Safe Deposit Boxes, and Storage Units			
20.			filed for bankruptcy, ved, or transferred?	were any financial ac	ccounts or instruments held in your name, or for your			
			•	er financial accounts; ons, and other financial	certificates of deposit; shares in banks, credit unions, brokerage institutions.			
	✓ No ☐ Yes	s. Fill in the details.						
21.		now have, or did urities, cash, or ot		ar before you filed fo	r bankruptcy, any safe deposit box or other depository			
	✓ No ☐ Yes	s. Fill in the details.						
22.	_	ou stored property	in a storage unit or	place other than you	r home within 1 year before you filed for bankruptcy?			
	✓ No	. Fill in the details.						

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 43 of 45

Deb	tor 1	James First Name	S Middle Name	Hodrick Last Name	Case number (if known)			
Pá	art 9:	1		Control for Someone Else	}			
23.	-	hold or control any in trust for someone		one else owns? Include any pr	operty you borrowed from, are storing for,			
	✓ No ☐ Yes	. Fill in the details.						
Pa	art 10:	Give Details Al	bout Environmer	ntal Information				
For	the purp	ose of Part 10, the f	ollowing definitions	apply:				
ł	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.							
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.							
				nental law defines as a hazardo ninant, or similar item.	ous waste, hazardous substance, toxic			
Rep	ort all no	otices, releases, and	l proceedings that yo	ou know about, regardless of v	vhen they occurred.			
24.	Has any law?	/ governmental unit	notified you that you	u may be liable or potentially li	able under or in violation of an environmental			
	✓ No ☐ Yes	. Fill in the details.						
25.	☑ No	ou notified any gove . Fill in the details.	rnmental unit of any	release of hazardous material	?			
26.	Have you	ou been a party in ar	ny judicial or adminis	strative proceeding under any	environmental law? Include settlements and			
	✓ No ☐ Yes	. Fill in the details.						

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 44 of 45

Debtor 1		James	S	Hodrick	Case number (if known)			
		First Name	Middle Name	Last Name				
P	art 11:	Give Deta	ils About Your Bu	siness or Connecti	ons to Any Business			
27.	Within busine	•	you filed for bankrupt	cy, did you own a busi	ness or have any of the following connections to any			
		A member of A partner in a An officer, dir	a limited liability compa partnership ector, or managing exec	ny (LLC) or limited liabili				
	✓ No. None of the above applies. Go to Part 12.✓ Yes. Check all that apply above and fill in the details below for each business.							
28.	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.							
	☐ No ☐ Yes. Fill in the details below.							
P	art 12:	Sign Belo	w					
hat oro	answe	rs are true and y fraud in conn	correct. I understand	that making a false sta	attachments, and I declare under penalty of perjury tement, concealing property, or obtaining money or nes up to \$250,000, or imprisonment for up to 20 years,			
-		es S Hodrick		X Signature of De				
•	James S	Hodrick, Debto	r 1	Signature of De	ebtor 2			
[Date _	08/16/2016	_	Date				
☑	No Yes				for Individuals Filing for Bankruptcy (Official Form 107)? u fill out bankruptcy forms?			
√	No							
		ame of person			Attach the Bankruptcy Petition Preparer's Notice,			

Declaration, and Signature (Official Form 119).

Case 16-26192 Doc 1 Filed 08/16/16 Entered 08/16/16 07:06:41 Desc Main Document Page 45 of 45

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

IN RE: James S Hodrick CASE NO

CHAPTER 13

VERIFICATION OF CREDITOR MATRIX

knowledge.		
Date 8/16/2016	Cignotius /s/ James S Hodrick	
	Signature /s/ James S Hodrick James S Hodrick	

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her